

**AMENDMENT TRANSMITTAL****PATENT**

Application No. 42390/943,874  
Filing Date: August 31, 2001  
First Named Inventor Ebrahim Andideh et al.  
Examiner's Name: Fourson III, George R.  
Art Unit: 2823  
Attorney Docket No.: 42390.P10974

An Amendment After Final Action (37 CFR 1.116) is attached and applicant(s) request expedited action.

Charge any fee not covered by any check submitted to Deposit Account No. 02-2666.

Applicant(s) hereby request and authorize the U.S. Patent and Trademark Office to (1) treat any concurrent or future reply that requires a petition for extension of time as incorporating a petition for extension of time for the appropriate length of time and (2) charge all required fees, including extension of time fees and fees under 37 CFR 1.16 and 1.17, for any concurrent or future reply to Deposit Account No. 02-2666.

Applicant(s) claim small entity status (37 CFR 1.27).

**ATTACHMENTS**

Preliminary Amendment  
 Amendment/Response with respect to Office Action  
 Amendment/Response After Final Action (37 CFR 1.116) (reminder: consider filing a Notice of Appeal)  
 Notice of Appeal  
 RCE (Request for Continued Examination)  
 Supplemental Declaration  
 Terminal Disclaimer (reminder: if executed by an attorney, the attorney must be properly of record)  
 Information Disclosure Statement (IDS)  
 Copies of IDS citations  
 Petition for Extension of Time  
 Fee Transmittal Document (that includes a fee calculation based on the type and number of claims)  
 Cross-Reference to Related Application(s)  
 Certified Copy of Priority Document  
 Other: \_\_\_\_\_  
 Other: \_\_\_\_\_  
 Check(s)  
 Postcard (Return Receipt)

**SUBMITTED BY:**

BLAKELY SOKOLOFF TAYLOR &amp; ZAFMAN LLP

TYPED OR PRINTED NAME: Heather M. Molleur, Reg. No. 50,432

SIGNATURE:

DATE: 4/19/04

ADDRESS: 12400 Wilshire Boulevard, Seventh Floor

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TELEPHONE NO.: (408) 720-8300

**CERTIFICATE OF MAILING BY FIRST CLASS MAIL (if applicable)**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail with sufficient postage in an envelope addressed to Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria Virginia 22313-1450 on April 19, 2004

Claire Wallters

Date of Deposit

Name of Person Mailing Correspondence

Signature

4/19/2004

Date

Express Mail Label No. (if applicable): \_\_\_\_\_

APR 22 2004

## FEE TRANSMITTAL FOR FY 2004

(FY 2004 Begins 10/01/2003)

TOTAL AMOUNT OF PAYMENT (\$) 880.00

## Complete if Known:

Application No. 09/943,874  
 Filing Date August 31, 2001  
 First Named Inventor Ebrahim Andideh  
 Examiner Name Fourson III, George R.  
 Art Unit 2823  
 Attorney Docket No. 42390.P10974

 Applicant claims small entity status. See 37 CFR 1.27.

## METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  Other  None

## Deposit Account

Deposit Account Number : 02-2666

Deposit Account Name:

The Director is Authorized to do the following with respect to the above-identified Deposit Account:

Charge fee(s) indicated below.

Credit any overpayments.

Charge any additional fees during the pendency of this application.

Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.

Charge fee(s) indicated below except for the filing fee.

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity	Small Entity				
Fee	Fee	Fee	Code	Fee	Fee Description
1001	7702001	385	Utility application filing fee		
1002	3402002	170	Design application filing fee		
1003	5302003	265	Plant filing fee		
1004	7702004	385	Reissue filing fee		
1005	1602005	80	Provisional application filing fee		

Fee Paid

SUBTOTAL (1) \$ 0

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Extra Claims			Fee from below	Fee Paid
Total Claims	<u>6</u>	<u>- 23** = 0</u>	X	=
Independent Claims	<u>3</u>	<u>- 4** = 0</u>	X	=
Multiple Dependent				

\*\*Or number previously paid, if greater; For Reissues, see below.

## Large Entity Small Entity

Fee	Fee	Fee	Code	Fee	Fee Description
1202	182202	9	Claims in excess of 20		
1201	862201	43	Independent claims in excess of 3		
1203	2902203	145	Multiple dependent claim, if not paid		
1204	862204	43	**Reissue independent claims over original patent		
1205	182205	9	**Reissue claims in excess of 20 and over original patent		

SUBTOTAL (2) \$ 0

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

<u>Large Entity</u>	<u>Small Entity</u>	<u>Fee Description</u>	<u>Fee Paid</u>
<u>Fee Code</u>	<u>Fee (\$)</u>	<u>Fee Code</u>	<u>Fee (\$)</u>
1051	130	2051	65
1052	50	2052	25
1053	130	1053	130
1812	2,520	1812	2,520
1813	8,800	1813	8,800
1804	920*	1804	920*
1805	1,840*	1805	1,840*
1251	110	2251	55
1252	420	2252	210
1253	950	2253	475
1254	1,480	2254	740
1255	2,010	2255	1,005
1401	330	2401	165
1402	330	2402	165
1403	290	2403	145
1451	1,510	1451	1,510
1452	110	2452	55
1453	1,330	2453	665
1501	1,330	2501	665
1502	480	2502	240
1503	640	2503	320
1460	130	1460	130
1807	50	1807	50
1806	180	1806	180
8021	40	8021	40
1809	770	2809	385
1814	110	2814	55
1810	770	2810	385
1801	770	2801	385
1802	900	1802	900
1504	300	1504	300
1505	300	1505	300
1803	130	1803	130
1808	130	1808	130
1454	1,330	1454	1,330

Other fee (specify) \_\_\_\_\_

Other fee (specify) \_\_\_\_\_

**SUBTOTAL (3) \$ 880.00**

\*Reduced by Basic Filing Fee Paid

**SUBMITTED BY:**

Typed or Printed Name: Heather M. Molleur

Signature: H Molleur Date: 4/19/04Reg. Number: 50,432 Telephone Number: (408) 720-8300

Send to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450